PART B - FEE(S) TRANSMITTAL

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indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new comaintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the			
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7590 10/05/2010 Covidien 60 Middletown Avenue North Haven, CT 06473				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
					ckand	(Depositor's name)	
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				12/2/9010 (Date)			
APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR		ATT	ORNEY DOCKET NO.	CONFIRMATION NO.	
10/517,402 12/07/2004 TITLE OF INVENTION: HERNIA MESH TACKS		Christopher J. Criscuolo	2832 (203-3308) 4034		4034		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	01/05/2011	
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS				
DANG, PHONG SON H		3773	606-151000				
1. Change of correspondenc CFR 1.363). Change of correspon- Address form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	dence address (or Cha (22) attached. (tion (or "Fee Address"	nge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
(A) NAME OF ASSIGN Tyco Hea1	s an assignee is identi n 37 CFR 3.11. Comp NEE thcare Gro	fied below, no assignee letion of this form is NO' ${ m up} \;\; { m LP}$	data will appear on the part a substitute for filing an a (B) RESIDENCE: (CITY	ottent. If an assignee is assignment. and STATE OR COUNTY on CT 065	TRY) I 1	ocument has been filed for	
Please check the appropriate assignee category or categories (will not be printed on the patent):							
4a. The following fee(s) are submitted: 4b. Payment of Fce(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or cred overpayment, to Deposit Account Number 2 1 0 5 50 (enclose an extra copy of the control						ficiency, or credit any	
5. Change in Entity Status a. Applicant claims S	MALL ENTITY status	s. See 37 CFR 1.27.	☐ b. Applicant is no long	er claiming SMALL EN	TITY status. See 37 CF	FR 1.27(g)(2).	
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if requords of the United Stat	ired) will not be accepted es Patent and Trademark	from anyone other than th	e applicant; a registered	attorney or agent; or th	e assignee or other party in	
Authorized Signature Date 12/2/20/0 Typed or printed name Joseph Bendew-Zanoni Registration No. 51,454							
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